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Colder, Colder Charles (Cold Car State Co. E.) Caller					Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.						
7590 08/06/2007					- · · · · · · · · · · · · · · · · · · ·						
Barry E. Bretschneider Morrison & Foerster LLP Suite 300 1650 Tysons Boulevard McLean, VA 22102					Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.						
					(Depositor's name)						
McLean, v A 22	102								(Signature)		
									(Date)		
APPLICATION NO.	FILING DATE		FIRST NAMED INVEN	TOR	ATTOR		DRNEY DOCKET NO.		CONFIRMATION NO.		
10/774,373 02/10/2004		Seiji Harada		325772034100 1123							
TITLE OF INVENTION: PRINTING DEVICE, PRINTING METHOD, PRINTING PROGRAM AND COMPUTER-READABLE RECORDING MEDIUM ON WHICH THE PROGRAM IS RECORDED											
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE D	UE	PREV. PAID ISSU	e fee	TOTAL FEE(S) DUE		DATE DUE		
nonprovisional	МО	\$1400	\$300		\$0		\$1700		11/06/2007		
EXAMINER		ART UNIT	CLASS-SUBCLASS	CLASS-SUBCLASS							
GOLDBERG, BRIAN J		2861	347-023000								
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys 1 Morrison & Foerster LLP								
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			or agents OR, alternatively, (2) the name of a single firm (having as a member a								
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single time (naving as a incinct a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is 3 listed, no name will be printed.								
3. ASSIGNEE NAME A	ND RESIDENCE DATA	A TO BE PRINTED ON	THE PATENT (print o	or typ	ne)						
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.											
(A) NAME OF ASSI			(B) RESIDENCE: (C								
		S TECHNOLOGIE			_	-	JAPAN		in Decrement		
Please check the appropr	riate assignee category or	categories (will not be p	rinted on the patent):		Individual QIC	orporatio	n or other private gro	up ent	dry Government		
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Publication Fee (1	Payment by credi	Payment by credit card. Form PTO-2038 is attached.									
Advance Order -	The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 03-1952 (enclose an extra copy of this form).										
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a. Applicant claim	as SMALL ENTITY stat	us. See 37 CFR 1.27. uired) will not be accepte					ITY status. See 37 CF				
interest as shown by the	records of the United St	ites Patent and Trademark	k Office.	nan .	no apprount, a reg						
Authorized Signature	Date <u>October 12, 2007</u>										
Typed or printed nam		Registration No. 28,055									
an application. Confider submitting the complete this form and/or sugges: Box 1450, Alexandria; \(^1\)	thality is governed by 3: ad application form to the tions for reducing this by Virginia 22313-1450. Do 313-1450.	CFR 1.311. The information of U.S.C. 122 and 37 CFR e USPTO. Time will varunden, should be sent to the ONOT SEND FEES OR persons are required to re-	y depending upon the ne Chief Information C COMPLETED FORM	indiv Office 4S To	vidual case. Any coor, U.S. Patent and O THIS ADDRES	omments I Tradem S. SENI	s on the amount of tir ark Office, U.S. Depa TO: Commissioner	ne you artmen for Par	u require to complete at of Commerce, P.O. tents, P.O. Box 1450,		
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